#### CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

### STATEMENT OF ECONOMIC INTERESTS COVER PAGE

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CITY CLERK OFFICE

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City Counci	y, or Court	
Agency Name  City of Ple Division, Board, De	easanton	
City of Ple Division, Board, De City Counci		·
Division, Board, De		
City Counci	epartment, District, if applicable	<del></del>
<del></del>		Your Position
▶ If filing for multir		Mayor
	ple positions, list below or on an attachment.	
Agency: SEE	ATTACHED	Position:
Jurisdiction (	of Office (Check at least one box)	<del></del>
State		☐ Judge (Statewide Jurisdiction)
Multi-County _	·	County of
X City of Pleas	santon	Other
Type of State	ement (Check at least one box)	
X Annual: The 2010.	period covered is January 1, 2010, through Dec	cember 31, Leaving Office: Date Left/(Check one)
The period 2010.	covered is/, through Deco	ember 31, O The period covered is January 1, 2010, through the date of leaving office.
Assuming Off	rice: Date/	The period covered is, through the date of leaving office.
Candidate: El	lection Year Office sou	ught, if different than Part 1:
Schedule Sur	mmary	
	schedules or "None."	► Total number of pages including this cover page:5
X Schedule A-1	- investments - schedule attached	Schedule C - Income, Loans, & Business Positions – schedule attached
	- Investments - schedule attached	X Schedule D - Income - Gifts - schedule attached
Schedule B - /	Real Property - schedule attached	Schedule E - Income - Gifts - Travel Payments - schedule attached
	-or-	
	None - No reporta	able interests on any schedule

#### **SCHEDULE A-1 Investments**

## Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Hosterman, Jennifer

► NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
Nordstrom GENERAL DESCRIPTION OF BUSINESS ACTIVITY	Apple Computer GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Department Store         FAIR MARKET VALUE         [X] \$2,000 - \$10,000       ☐ \$100,001 - \$100,000         ☐ \$100,001 - \$1,000,000       ☐ Over \$1,000,000	COMPUTE'S  FAIR MARKET VALUE  \$2,000 - \$10,000
NATURE OF INVESTMENT  Stock Other (Describe)  Partnership O Income Received of \$0 - \$499  Income Received of \$500 or More (Report on Schedule C)	NATURE OF INVESTMENT  X Stock Other (Describe)  Partnership O Income Received of \$0 - \$499  Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:  03	IF APPLICABLE, LIST DATE:  03
NAME OF BUSINESS ENTITY  Blockbuster  GENERAL DESCRIPTION OF BUSINESS ACTIVITY	NAME OF BUSINESS ENTITY  Knot  GENERAL DESCRIPTION OF BUSINESS ACTIVITY
video         FAIR MARKET VALUE         \$2,000 - \$10,000       ▼ \$10,001 - \$100,000         \$100,001 - \$1,000,000       Over \$1,000,000         NATURE OF INVESTMENT       ▼ Stock       Other         (Describe)       Partnership O Income Received of \$0 - \$499         O Income Received of \$500 or More (Report on Schedule C)	Software   FAIR MARKET VALUE   \$\text{X} \ \$2,000 - \$10,000   \$10,001 - \$100,000   \$100,000   Over \$1,000,000   Over \$
IF APPLICABLE, LIST DATE:  03	IF APPLICABLE, LIST DATE:  ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY  Tempurpedic  GENERAL DESCRIPTION OF BUSINESS ACTIVITY	NAME OF BUSINESS ENTITY  VISA  GENERAL DESCRIPTION OF BUSINESS ACTIVITY
SOFTWATE  FAIR MARKET VALUE  X \$2.000 - \$10,000	Credit  FAIR MARKET VALUE  [X] \$2,000 - \$10,000
X Stock	
ACQUIRED DISPOSED	O3 , 30 , 08
Comments:	

#### **SCHEDULE A-1** Investments

## Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM / U U
FAIR POLITICAL PRACTICES COMMISSION
Name
Hosterman, Jennifer

٠	NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY	
	A Power Energy Generation GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY	
	distributed power generation  FAIR MARKET VALUE  □ \$2,000 - \$10,000  □ \$100,001 - \$1,000,000  □ Over \$1,000,000  NATURE OF INVESTMENT	FAIR MARKET VALUE  \$2,000 - \$10,000  \$10,001 - \$100,000  \$100,001 - \$1,000,000  Over \$1,000,000  NATURE OF INVESTMENT	
	X Stock ☐ Other	Stock Other (Describe)  Partnership Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Sched	lule C)
	IF APPLICABLE, LIST DATE:  03 / 30 / 10 /	IF APPLICABLE, LIST DATE:	
_	NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY	
•	GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY	
	FAIR MARKET VALUE  \$2,000 - \$10,000	FAIR MARKET VALUE  \$2,000 - \$10,000  \$10,001 - \$100,000  \$100,001 - \$1,000,000  Over \$1,000,000  NATURE OF INVESTMENT  Stock Other	
	(Describe)  Partnership (Income Received of \$0 - \$499  Income Received of \$500 or More (Report on Schedule C)	(Describe)  Partnership O Income Received of \$0 - \$499  Income Received of \$500 or More (Report on Schedi	ule C)
	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:	
<b>&gt;</b>	NAME OF BUSINESS ENTITY	➤ NAME OF BUSINESS ENTITY	
	GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY	
	FAIR MARKET VALUE  \$2,000 - \$10,000	FAIR MARKET VALUE  [ \$2,000 - \$10,000	
	NATURE OF INVESTMENT  Stock Other (Describe)	NATURE OF INVESTMENT Stock Other (Describe)	
	Partnership   Income Received of \$0 - \$499   Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedu	ıle C)
	IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:	-
	ACQUIRED DISPOSED	ACQUIRED DISPOSED	
Ce	mments.		

## SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name
Hosterman, Jennifer

▶ 1. BUSINESS ENTITY OR TRUST	▶ 1. BUSINESS ENTITY OR TRUST
Law Offices of J. Michael Hosterma	Law Office of J. Michael Hosterman
Name 555 Peters Avenue	Name
Pleasanton CA 94566	555 Peters Ave., Suite 115 Pleasanton CA 94566
Address (Business Address Acceptable) Check one	Address (Business Address Acceptable) Check one
☐ Trust, go to 2        Business Entity, complete the box, then go to 2	☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Law Office	law office
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
X \$100,001 - \$1,000,000 ACQUIRED DISPOSED	X \$100,001 - \$1,000,000 ACQUIRED DISPOSED
Over \$1,000,000	Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Sole Proprietorship Partnership Other	X Sole Proprietorship Partnership Other
YOUR BUSINESS POSITION Spouse's office	YOUR BUSINESS POSITION Spouse's office
➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA	► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA
SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
☐ \$0 - \$499 ☐ \$10,001 - \$100,000 ☐ \$500 - \$1,000 ☐ \$000 ☐ \$	[X] \$0 - \$499     □ \$10,001 - \$100,000 /       □ \$500 - \$1,000     □ OVER \$100,000
S1,001 - \$10,000	S1,001 - \$10,000
➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Altach a separate sheet if necessary)
► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST  Check one box:	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST  Check one box:
☐ INVESTMENT ☐ REAL PROPERTY	☐ INVESTMENT ☐ REAL PROPERTY
	1
Name of Business Entity or Street Address or Assessor's Parcel Number of Real Property	Name of Business Entity or Street Address or Assessor's Parcel Number of Real Property
Daniel of During Astrice	Description of Discisors Autobia
Description of Business Activity <u>or</u> City or Other Precise Localion of Real Property	Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:
<b>\$2,000 - \$10,000</b>	\$2,000 - \$10,000
\$10,001 - \$100,000	\$10,001 - \$100,000
Over \$1,000,000	Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Property Ownership/Deed of Trust Stock Partnership	Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
Comments	EDDC Form 700 (2010)2014) Sob. A 2

## SCHEDULE D Income - Gifts

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

Hosterman. Jennifer

▶ NAME OF SOURCE	NAME OF SOURCE		
Robert Redford	Clobal Water	· Intallia	ence
ADDRESS (Business Address Acceptable)	ADDRESS (Business		
Sundance Preserve 3520 N. University Ave.	Unknown Unkn		₽)
Provo Ut 84604	Unknown Un 9		
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY,		RCE
<b>6</b>	g		
conference	Conference		DESCRIPTION OF STEELS
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) \	VALUE	DESCRIPTION OF GIFT(S)
Conference, flight/r 11/07/09 s 1500.00 com accomodations	_11/_03/_10s	<b>1</b> 500.00	Flight/hotel accomodations
		\$	
	\$	<b>5</b>	
► NAME OF SOURCE	➤ NAME OF SOURCE		······································
· · · · · · · · · · · · · · · · · · ·			
ADDRESS (Business Address Acceptable)	ADDRESS (Business /	Address Acceptabl	θ)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY,	IF ANY, OF SOUR	RCE
	}		
DITE ( // // ) PROPERTY OF STATES	====================================		DESCRIPTION OF SITTION
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) V	VALUE	DESCRIPTION OF GIFT(S)
	1		
\$	/ \$	<u> </u>	
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// \$	s	S	·
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	/s	<b>3</b>	
► NAME OF SOURCE	➤ NAME OF SOURCE		·
	1		
ADDRESS (Business Address Acceptable)	ADDRESS (Business A	Address Acceptable	
	1		•
			<del></del>
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY,	IF ANY, OF SOUR	RCE
	]		
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) V	/ALUE	DESCRIPTION OF GIFT(S)
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	\$ \$.	<u></u>	
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Comments:	<del></del>	<del></del>	<del></del>
			•

# SCHEDULE E Income – Gifts Travel Payments, Advances, and Reimbursements



•	Reminder -	you	must	mark	the	gift	or	income	box.	
---	------------	-----	------	------	-----	------	----	--------	------	--

- · You are not required to report income from government agencies.
- You may mark the box 501(c)(3) for a travel payment received from a nonprofit 501(c)(3) organization. When the payment is a gift it is reportable but is not subject to the \$420 gift limit.

► NAME OF SOURCE	► NAME OF SOURCE
Sundance Preserve, Inc. & The Redford Center	Global Water Intelligence
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
c/o Sundance Group 3520 N. University Ave. Ste. 100	27 Park End Street
CITY AND STATE	CITY AND STATE
Provo, Utah 84604	Oxford OX1 1 HU United Kingdom
BUSINESS ACTIVITY, IF ANY, OF SOURCE X 501 (c)(3)	BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)
Environmental conservation	Water resource planning and funding
DATE(S): 11 / 07 / 10 - 11 / 09 / 10 AMT: \$ approx \$1,500	DATE(S): 11 / 03 / 10 - 11 / 04 / 10 AMT: \$ approx \$1,500
TYPE OF PAYMENT: (must check one) X Gift Income	TYPE OF PAYMENT: (must check one) X Gift Income
DESCRIPTION: travel(airfare),lodging, subsistence in Utah summit where I was panel participant & presenter on green building*(cont. below)	DESCRIPTION: travel(airfare),lodging, subsistence in DC conference where I presented re: water infrastructure funding**(cont. below)
NAME OF SOURCE	Verification
ADDRESS (Business Address Acceptable)	Print Name _ Jennifer Hosterman
CITY AND STATE	Office, Agency City of Pleasanton
BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)	Statement Type X 2010/2011 Annual Assuming Leaving Annual Candidate
DATE(S):	I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete.  I certify under sonable of basic under the laws of the State of Colifornia the (d)(5)
TYPE OF PAYMENT: (must check one)	California that (d)(3)
DESCRIPTION:	
·	Signature
Comments: *water conservation and land use at the local le	evel, and also having CA and national implications. ling legislative considerations and public policy.

#### JENNIFER HOSTERMAN

## 2010 ANNUAL STATEMENT EXPANDED FILING

#### **Annual**

- Alameda County Congestion Management Agency (CMA) Board Member
- Alameda County Transportation Improvement Authority (ACTIA) Board Member
- Alameda County Transportation Authority (ACTA) Alternate Board Member
- Bay Area Air Quality Management District (BAAQMD) Board Member
- Alameda County Local Agency Formation Commission (LAFCO) Board Member
- East Bay Regional Communications System Authority Board Member

#### **JENNIFER HOSTERMAN**

## 2010 ANNUAL STATEMENT EXPANDED FILING

#### <u>Annual</u>

- Alameda County Congestion Management Agency (CMA) Board Member
- Alameda County Transportation Improvement Authority (ACTIA) Board Member
- Alameda County Transportation Authority (ACTA) Alternate Board Member
- Bay Area Air Quality Management District (BAAQMD) Board Member
- Alameda County Local Agency Formation Commission (LAFCO) Board Member
- East Bay Regional Communications System Authority Board Member

## CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION

#### STATEMENT OF ECONOMIC INTEREST

#### PART POLITICAL CACTICES COMMISCOVER PAGE

AMENDMENT

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	SEP 2	6	2011	ש

CITY OF EBY DEFICE

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ÂME OF FILER (LAST)	(FIRST) (MIDDLE)
Hosterman	Jennifer
. Office, Agency, or Court	
Agency Name	•
City of Pleasanton	
Division, Board, Department, District, if applicable	Your Position
City Council	Mayor
▶ If filing for multiple positions, list below or on an attachme	ent.
Agency: See attached	Position:
	r osition.
. Jurisdiction of Office (Check at least one box)	
State	☐ Judge (Statewide Jurisdiction)
Multi-County	County of
☑ City of Pleasanton	Other
. Type of Statement (Check at least one box)	
Annual: The period covered is January 1, 2010, throug 2010.	gh December 31, Leaving Office: Date Left/(Check one) .
The period covered is, throug 2010.	th December 31,  O The period covered is January 1, 2010, through the date of leaving office.
Assuming Office: Date/	O The period covered is/, through the date of leaving office.
Candidate: Election Year Offi	fice sought, if different than Part 1:
. Schedule Summary	<del></del>
Check applicable schedules or "None."	► Total number of pages including this cover page:3
Schedule A-1 - Investments – schedule attached	Schedule C - Income, Loans, & Business Positions - schedule attached
Schedule A-2 - Investments - schedule attached	Schedule D - Income - Gifts - schedule attached * (see be
Schedule B - Real Property - schedule attached	Schedule E - Income - Gifts - Travel Payments - schedule attached
	-or-
☐ None - No i	reportable interests on any schedule
. Verification	<del></del>
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Document)	CITY STATE ZIP CODE
P.O. Box 520	Pleasanton CA 94566
DAYTIME TELEPHONE NUMBER	E-MAIL ADDRESS
( 925 ) 931-5002	jhosterman@ci.pleasanton.ca.us
herein and in any attached schedules is true and complete.	
I certify under penalty of perjury under the laws of the S	State of California that th
Date Signed 9/26/11	Signature .

FPPC Form 700 (2010/2011) FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov